

COMMONWEALTH of VIRGINIA

DEPARTMENT OF ENVIRONMENTAL QUALITY

Blue Ridge Regional Office www.deq.virginia.gov

David K. Paylor Director

Robert J. Weld Regional Director

Roanoke Office 3019 Peters Creek Road

Roanoke, Virginia 24019 (540) 562-6700 Fax (540) 562-6725

OCT 1 5 2013

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Clifton L. Parker, IV Aqua Virginia, Inc. 2414 Granite Ridge Road Rockville, VA 23146

Doug W. Domenech

Secretary of Natural Resources

Lynchburg Office

(434) 582-5120

Fax (434) 582-5125

7705 Timberlake Road

Lynchburg, Virginia 24502

Re:

VPDES Permit No. VA0027481 Blacksburg Country Club WWTP

Dear Mr. Parker, IV:

The staff has reviewed the change of ownership and has approved the ownership change modification of the referenced permit. A Discharge Monitoring Report (DMR) form is included with the permit. This permit supersedes the previous VPDES Permit VA0027481 issued to this facility. The first DMR required by this permit for monthly monitored parameters is due on **December 10**th for the month of November 2013. If you still have DMR data to report as required by the previous permit, please submit it as an attachment to the first DMR required by this permit. Monitoring results on the DMRs should be reported to the same number of significant digits as are included in the permit limit for the parameter.

DEQ has launched an e-DMR program that allows you to submit the effluent data electronically. We expect every permittee to use e-DMR as permits are reissued and exceptions will only be done on a case by case basis. There are many benefits to both DEQ and the permittee when e-DMR is utilized for submissions:

- 1) Fewer revisions for data since the e-DMR program automatically flags omissions before the data are submitted;
- 2) Cost savings on postage, copying, and paper;
- 3) No concerns about using the most current DMR: e-DMR refreshes the required parameters automatically when changes are needed;
- 4) Submittals can be made on a timelier basis; and

Permit No. VA0027481 Blacksburg Country Club WWTP Page 2 of 2

5) Electronic signatures from multiple people are allowed and e-DMR can be accessed from multiple computer locations.

We ask that you apply for e-DMR participation now although you may apply at any time. The following website provides details and our Roanoke regional e-DMR administrator (Cathy Kibler, 540-562-6779, www.cathy.kibler@deq.virginia.gov) can also assist you: http://www.deq.state.va.us/Programs/Water/PermittingCompliance/ElectronicDMRsubmissions.aspx

As provided by Rule 2A:2 of the Supreme Court of Virginia, you have thirty days from the date of service (the date you actually received this decision or the date it was mailed to you, whichever occurred first) within which to appeal this decision by filing a notice of appeal in accordance with the Rules of the Supreme Court of Virginia with the Director, Department of Environmental Quality. In the event that this decision is served on you by mail, three days are added to that period.

Alternatively, any owner under Section 62.1 - 44.16, 62.1 - 44.17, and 62.1 - 44.19 of the State Water Control Law aggrieved by any action of the State Water Control Board taken without a formal hearing, or by inaction of the Board, may demand in writing a formal hearing of such owner's grievance, provided a petition requesting such hearing is filed with the Board. Said petition must meet the requirements set forth in 9 VAC 25-230-130 (Procedural Rule 1-- Petition for formal). In cases involving actions of the Board, such petition must be filed within thirty days after notice of such action is mailed to such owner by certified mail.

If you have questions about the permit, please call Becky L. France at (540) 562-6793 or becky.france@deq.virginia.gov.

Sincerely,

Robert J. Weld

Regional Office Director

Wast 1

Enclosures: Permit No. VA0027481, Discharge Monitoring Report

cc: EPA - Region III-3WP12

Daina Reynolds, III, B&J Enterprises, L.C.

PERMITTEE NAME/ADDRESS(INCLUDE FACILITY NAME/LOCATION IF DIFFERENT)

Rockville

LOCATION 1064 Clubhouse Rd

Blacksburg Country Club WWTP

23146

2414 Granite Ridge Rd

NAME

ADDRESS

COMMONWEALTH OF VIRGINIA DEPARTMENT OF ENVIRONMENTAL QUALITY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM(NPDES) DISCHARGE MONITORING REPORT(DMR)

VA0027481 001 PERMIT NUMBER DISCHARGE NUMBER MONITORING PERIOD YEAR MO YEAR MO DAY DAY TO FROM

Municipal Minor

10/15/2013

DEPT. OF ENVIRONMENTAL QUALITY (REGIONAL OFFICE)

Blue Ridge Regional Office 3019 Peters Creek Road

Roanoke

VA 24019

NOTE: READ PERMIT AND GENERAL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

| PARAMETER | | QUANTITY OR LOADING | | | QUALITY OR CONCENTRATION | | | | NO. | FREQUENCY | SAMPLE |
|---------------------------------|---------|---------------------|---------|--|--------------------------|--|--|------------------|--|----------------|--------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | UNITS | EX. | OF ANALYSIS | TYPE |
| 001 FLOW | REPORTD | | | | ***** | ***** | ***** | | ' | | |
| | REQRMNT | 0.035 | NL | MGD | ****** | ****** | ****** | | | 1/DAY | EST |
| 002 PH | REPORTD | **** | ***** | | | ****** | | | | 1/2111 | 1551 |
| | REQRMNT | ***** | ***** | | 6.5 | ***** | 9.0 | SU | - | 1/DAY | GRAB |
| 003 BOD5 | REPORTD | | | | ****** | | <u> </u> | _ - | - | I/DA1 | GRAB |
| | REQRMNT | 3900 | 5900 | G/D | ****** | 30 | 45 | MG/L | | 1/M | GRAB |
| 004 TSS | REPORTD | | | | ***** | | <u> </u> | | | 1714 | JORAB |
| | REQRMNT | 3900 | 5900 | G/D | ****** | 30 | 45 | MG/L | | 1/M | GRAB |
| 005 CL2, TOTAL | REPORTD | ***** | ****** | | ****** | | | 1 | + | 1/11 | GRAB |
| | REQRMNT | ***** | ****** | - | ***** | 0.042 | 0.051 | MG/L | | 1/DAY | GRAB |
| 080 TEMPERATURE, WATER (DEG. C) | REPORTD | ****** | ***** | | ****** | ****** | <u> </u> | | + | I/ DAI | GICAB |
| | REQRMNT | ****** | ****** | | ***** | ****** | NL | c | | 1/DAY | IS |
| 20 E.COLI | REPORTD | ****** | **** | | ****** | | | | | I/DRI | 13 |
| | REQRMNT | **** | ****** | | ****** | 126 | 235 | N/CML | | 1/W | GRAB |
| .57 CL2, TOTAL CONTACT | REPORTD | ****** | ****** | | | ****** | ****** | <u> </u> | ╁ - | 1 ± / W | GRAD |
| | REQRMNT | ****** | ****** | | 1.0 | ****** | ****** | MG/L | 3 | 1/DAY | GRAB |

oil and grease 1/month for 12 months; then 1/quarter

| BYPASSES AND | TOTAL OCCURRENCES | TOTAL FLOW(M.G.) | TOTAL BOD5(K.G.) | OPERATOR IN RESPONSIBLE CHARGE | | | | DATE | |
|--|--|---|----------------------------|--------------------------------|-----------|-----------------|-------------|------|-----|
| OVERFLOWS | | | | | | | | | |
| CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS MERE REPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM ESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE | | | | TYPED OR PRINTED NAME | SIGNATURE | CERTIFICATE NO. | YEAR | MO. | DAY |
| | ESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE HE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS | | | PRINCIPAL EXECUTIVE OFFICE | TELEPHONE | | | | |
| HO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING HE INFORMATION, THE INFORMATION SUBMITTED IS TO THE BEST OF MY KNOWLEDGE | | | BLE FOR GATHERING | | | | | | |
| AND BELIEF TRUE, A | ACCURATE AND COMPLETING | TE. I AM AWARE THAT FALSE INFORMATION, | THERE ARE INCLUDING THE | TYPED OR PRINTED NAME | SIGNATURE | | YEAR | MO. | DAY |

PERMITTEE NAME/ADDRESS(INCLUDE FACILITY NAME/LOCATION IF DIFFERENT)

Rockville

FACILITY LOCATION 1064 Clubhouse Rd

Blacksburg Country Club WWTP

23146

2414 Granite Ridge Rd

NAME

ADDRESS

COMMONWEALTH OF VIRGINIA DEPARTMENT OF ENVIRONMENTAL QUALITY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM(NPDES) DISCHARGE MONITORING REPORT(DMR)

VA0027481 001 PERMIT NUMBER DISCHARGE NUMBER MONITORING PERIOD YEAR МО DAY YEAR MO DAY TO FROM

Municipal Minor

10/15/2013 .

DEPT. OF ENVIRONMENTAL QUALITY (REGIONAL OFFICE)

Blue Ridge Regional Office 3019 Peters Creek Road

Roanoke

VA 24019

NOTE: READ PERMIT AND GENERAL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

| PARAMETER | | QUANT | ITY OR LOADING | | QUALITY OR CONCENTRATION | | | | NO. | FREQUENCY | |
|------------------------|---------|-------------|----------------|--|--------------------------|-------------|----------|--|----------------|----------------|--------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | UNITS | EX. | OF ANALYSIS | TYPE |
| 213 CL2, INST TECH MIN | REPORTD | ***** | ****** | | | ***** | ***** | | <u> </u> | | |
| | REQRMNT | ****** | ***** | | 0.60 | ***** | ****** | MG/L | | 1/DAY | GRAB |
| 500 OIL & GREASE | REPORTD | ****** | ***** | | ****** | ****** | 1 | † | | 1/2/11 | GIGAD |
| | REQRMNT | **** | ***** | | ****** | ***** | NL | MG/L | | 1/M | GRAB |
| 823 TSS, MONTHLY LOAD | REPORTD | ***** | | 1 | ****** | ***** | ****** | <u> </u> | - | 1711 | GRAB |
| | REQRMNT | ***** | NL | KG | ***** | ***** | ****** | + | | 1/M | CALC |
| 824 TSS, CALENDAR YEAR | REPORTD | ***** | | | ****** | ******* | ****** | <u> </u> | - | | CABC |
| | REQRMNT | *** | 1424 | KG | ****** | ***** | ****** | | | 1/YR | CALC |
| 825 TSS, YEAR-TO-DATE | REPORTD | ****** | | | ***** | ***** | ****** | <u> </u> | 1 | 1/110 | CALC |
| | REQRMNT | ***** | NL | KG | ****** | ***** | ****** | | | 1/M | CALC |
| | REPORTD | | - | <u> </u> | | <u> </u> | <u> </u> | | | 12/11 | CALC |
| | REQRMNT | | - | - | | | | | | ***** | |
| | REPORTD | | | · | | | 1 | <u> </u> | | | <u> </u> |
| | REQRMNT | | | | | | | | + | ***** | |
| | REPORTD | | | <u>- </u> | | | 1 | | - | | |
| | REQRMNT | | | | | | | | - | ***** | |

oil and grease 1/month for 12 months; then 1/quarter

| BYPASSES AND OVERFLOWS | OCCURRENCES | TOTAL FLOW(M.G.) | TOTAL BOD5(K.G.) | OPERATOR | IN RESPONSIBLE CHARGE | | DATE | | |
|---|---|----------------------------|-------------------|-----------------------|-----------------------|----------------------|------|-----|-----|
| CERTIFY UNDER P | CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE EPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM | | | TYPED OR PRINTED NAME | SIGNATURE | CERTIFICATE NO. YEAR | | MO. | DAY |
| ESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE HE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS HO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING | | PRINCIPAL EXECUTIVE OFFICE | TELEPHONE | | | | | | |
| HE INFORMATION, THE INFORMATION SUBMITTED IS TO THE BEST OF MY KNOWLEDGE | | | T OF MY KNOWLEDGE | | | · | | . ! | l |
| ND BELIEF TRUE, ACCURATE AND COMPLETE. I AM AMARE THAT THERE ARE IGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE OSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. | | TYPED OR PRINTED NAME | SIGNATURE | | YEAR | MO. | DAY | | |

This report is required by your VPDES permit and by law. (See, e.g., the Code of Virginia of 1950 §62.1-44.5 and 9 VAC 25-31-50.) Failure to report or failure to report truthfully can result in civil penalties of \$32,500 per violation, per day and felony prosecutions which can carry a 15 year term.

DISCHARGE MONITORING REPORT (DMR) - GENERAL INSTRUCTIONS

- 1. Complete this form in permanent ink or indelible pencil. The use of 'correction fluid/tape' is not allowed.
- 2. Be sure to enter the dates for the first and last day of the period covered by the report on the form in the space marked "Monitoring Period".
- 3. For those parameters where the "permit requirement" spaces have a requirement or limitation, provide data in the "reported" spaces in accordance with your permit.
- 4. Enter the average and maximum quantities and units in the "reported" spaces in the columns marked "Quantity or Loading". KG/DAY = Concentration (mg/L) x Flow (MGD) x 3.785 G/D (Grams/Day) = Concentration (mg/L) x Flow (MGD) x 3785
- 5. Enter maximum, minimum, and/or average concentrations and units in the "reported" spaces in the columns marked "Quality or Concentration".
- 6. For all parameters enter the number of samples which do not comply with the maximum and/or minimum permit requirements in the "reported" space in the column marked "No. Ex." (Number of Exceedances). If none, enter "0". Do NOT include monthly average violations in this field. Include any Maximum 7-Day Average and Maximum Weekly Average violations in this field. Permittees with continuous pH, or temperature monitoring requirements should consult the permit for what constitutes an exceedance and report accordingly.
- 7. You are required to sample (at a minimum) according to the Sample Frequencies and Sample Types specified in your permit.
- 8. Enter the actual frequency of analysis for each parameter (number of times per day, week, month, etc.) in the "reported" space in the column marked "Frequency of Analysis".
- 9. Enter the actual type of sample (Grab, 8HC, 24HC, etc) collected for each parameter in the "reported" space in the column marked "Sample Type".
- 10. Enter additional required data or comments in the space marked "additional permit requirements or comments". If additional required data or comments are appended to the DMR, reference appended correspondence in this field.
- 11. Record the number of bypasses during the month, the total flow in million gallons (MG) and BOD5 in kilograms (KG) in the proper columns in the section marked "Bypasses and Overflows".
- 12. The operator in responsible charge of the facility should review the form and sign in the space provided. If the plant is required to have a licensed operator or if the operator in responsible charge of the facility is a licensed operator, the operator's signature and certificate number must be reported in the spaces provided.
- 13. The principal executive officer then reviews the form and must sign in the space provided and provide a telephone number where he/she can be reached. Every page of the DMR must have an original signature.
- 14. Send the completed form(s) with original signatures to your Department of Environmental Quality Regional Office by the 10th of each month unless otherwise specified in the permit.
- 15. You are required to retain a copy of the report for your records.
- 16. Where violations of permit requirements are reported, attach a brief explanation in accordance with the permit requirements describing causes and corrective actions taken. Reference each separate violation by date.
- 17. If you have any questions, contact the Department of Environmental Quality Regional Office listed on the DMR.